

STAFF SUGGESTION SCHEME

Ideas and suggestions will be dealt with on a monthly basis. Ideas received by 1st of the month will be considered and decisions made by the end of the month.

Name(s):	SDU(s):
Contact:	Tel:
Signature of applicant:	

Please complete the form overleaf to give details of your suggestion/idea.

This form should be returned to:

Mike Fleming,
Director of Personnel & Administration
The John Radcliffe Hospital

Please ensure that the form is signed and dated before its return.

Additional copies can also be obtained from the Personnel Department: Tel. 21184 (JR)
or Tel. 25012 (Ch)

Date received:	Ref. No.
Circulated: Yes <input type="checkbox"/> No <input type="checkbox"/>	Date:
Result of suggestion:	
Consider by panel: Yes <input type="checkbox"/> No <input type="checkbox"/>	Date:
Award made:	Date:

Brief Description

Aims of suggestion

(if necessary, please continue on another sheet)

Benefits expected:

(Can these be measured and if so how?)

Are any costs involved?

(staff costs, non pay costs etc. – try and list these)

